Abstract

Atrial myxoma is the commonest intra cardiac tumour. However, intra cardiac tumours are encountered very rarely. It is usually a benign, polypoidal mass attached to atrial wall. Left atrium is the commonest site of myxomas. It gives rise to serious life-threatening complications due to tumour embolization, intra cardiac obstruction and cardiac arrhythmias. Features of heart failure, valvopathy, constitutional symptoms and manifestations of systemic embolization are common clinical presentations. However, a substantial number of patients are asymptomatic.

Our patient is a 59 years old male. He presented with progressive exertional dyspnoea and mild nonspecific central chest pain for 2 weeks. Initial transthoracic echo cardiogram as well as trans- oesophageal echo cardiogram revealed a large, highly mobile left atrial myxoma. He didn't have any complications of myxoma. Urgent surgical resection of the tumour was done successfully. Histology revealed characteristic features of a myxoma.

There is high risk of life-threatening complications and sudden cardiac death even in asymptomatic patients. Therefore, we would like to emphasize the value of timely diagnosis and interventions for atrial myxoma.